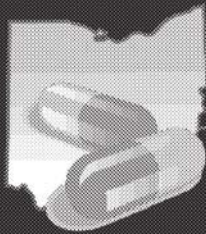


Exhibit 107



OHIO PRESCRIPTION DRUG ABUSE TASK FORCE

*George T. Maier, Chair
Department of Public Safety*

*Dr. Alvin Jackson, Vice Chair
Department of Health*

**Ohio Prescription Drug Abuse Task Force (OPDATF)
Organizational Meeting Minutes
Wednesday, April 21, 2010
(DRAFT)**

Task Force Members Present:

George Maier, Chair, Assistant Director of the Ohio Department of Public Safety
Dr. Alvin D. Jackson, Vice-Chair, Director of the Ohio Department of Health
Angela Cornelius Dawson, Director, Ohio Department of Alcohol and Drug Addiction Services
Cynthia Callender Dungey, Assistant Deputy Director, Ohio Department of Job & Family Services
Michael Miller for J. Craig Strafford, M.D., M.P.H., Board Member, State Medical Board of Ohio
William T. Winsley, Executive Director, Ohio State Board of Pharmacy
Dr. David Applegate, President, Ohio State Coroners Association
Gregory Ervin, Health Commissioner, Jackson County Health Department
Chief Charles Horner, Portsmouth Police Department
Carter Stewart, United States Attorney, Southern District of Ohio
Rebecca Lutzko for Steven Dettelbach, United States Attorney, Northern District of Ohio
Tim Maglione for Dr. Kort Gronbach, Staff Pain & Medicine & Anesthesiologist, Adena Regional Center
Jon Wills, Executive Director, Ohio Osteopathic Association
Ernest Boyd, Executive Director, Ohio Pharmacists Association
Tim Colburn, President & Chief Executive Officer, Berger Health System
Dr. S. David Baker, Managing Director, Ohio Poison Control Collaborative
Rep. Clayton Luckie, (D-39th, Dayton), State Representative, Ohio House of Representatives
Rep. Dave Burke, (R-83rd, Marysville), State Representative, Ohio House of Representatives
Keeley Harding, Pediatric Nurse Practitioner, Children's Hospital Medical Center
Christopher Forst for Michael Moné, VP, Anti-Diversion & Senior Regulatory Counsel, Cardinal Health
Lili C. Reitz, Executive Director, Ohio State Dental Board
Sgt. Richard Meadows, Ohio State Highway Patrol
Betsy Houchen, Executive Director, Ohio Board of Nursing
Ed Hughes, Executive Director, The Counseling Center

Other Attendees:

Kelly McGivern, Ohio Association of Health Plans
Renuka Mayadev, Office of the Governor
Noah Blundo, Hannah News
Fred Alverson, US Attorney's Office
Ed Stockhausen, State Senator Shirley Smith
Willa J. Ebersole, Pappas & Associates
Connor Patton, Academy of Medicine of Cleveland & Northern Ohio

Rachel Buccicone, Gongwer
Tom Dilling, Ohio Nursing Board
Adam Hewit, Ohio Dental Association
Nan Migliozi, Ohio Department of Health
Cameron McNamee, Ohio Department of Health
Dave Hodapp, Office of U.S. Senator Sherrod Brown
Jeff Smith, Ohio State Medical Association
Heath A. Joliff, Central Ohio Poison Center
Jen House, Ohio Department of Health
Jessica Alaimo, Newspaper Network of Central Ohio
Justin Long, Ohio Department of Public Safety
Maria Clark, Ohio Department of Public Safety
Cindy Butts, Ohio Department of Public Safety
Brenda Miller, Ohio Department of Public Safety
Thomas Hunter, Ohio Department of Public Safety
Judi Moseley, Ohio Department of Health
Christy Beeghly, Ohio Department of Health
Kim Anderson, SMBO
Mike Weinman, Ohio Department of Public Safety
Elise Geig, Ohio Nurses Association
Christina Madriguera, Office of the Governor
McKenzie Davis, The Success Group

Thomas Hunter, Deputy Director of the Ohio Department of Public Safety and meeting Facilitator, called the meeting to order. He welcomed everyone to the first Ohio Prescription Drug Abuse Task Force meeting and introduced Chair, George Maier, Assistant Director of the Ohio Department of Public Safety and the Vice-Chair, Dr. Alvin Jackson, Director of the Ohio Department of Health.

Opening Remarks

George Maier, Chair and Dr. Alvin D. Jackson, Vice-Chair began the meeting with opening remarks.

Introduction of Staff from the Ohio Department of Health and the Ohio Department of Public Safety

Introduction of Task Force Members

Presentations

Christy Beeghly presented the *“Alarming Rise in Unintentional Drug Overdose Deaths in Ohio”*.

Highlights of this presentation:

- Ohio’s unintentional poison death rate increased over 300 percent during 1999 to 2008 while motor vehicle traffic crash deaths experienced a decrease.
- Currently deaths from drug poisonings are about 18 percent higher than the number of motor vehicle traffic related deaths.
- In 1999 there was an average of one death per day based on a population of 100,000.
- In 2008 the death rate was up to four deaths per day.
- From 2000 to 2006 the death rate has doubled nationally.
- Ohio’s death rate has been increasing faster than the national rate.
- The worst part of this epidemic is found in southern Ohio and some of the Appalachian areas.

- Prescription drugs are becoming a larger epidemic than illicit drugs.
- Males are at higher risk and account for about two-thirds of the deaths from 2005 to 2007; although the death rate for females is growing faster than males.
- Drugs that are most associated with overdoses nationally and in Ohio are Oxycodone, Hydrocodone, Methadone and Fentanyl.
- According to the 2008 Ohio's drug overdose data, prescription opioids accounted for 47 percent of unintentional drug overdoses. Multiple drugs were found in three out of four deaths.
- The higher death rates due to this problem have occurred in southern Ohio.
- The average cost to the state of Ohio is approximately 4 billion dollars a year.
- Growth in overall prescription drug use, over prescribing and pressure to satisfy customers, along with an illegal widespread diversion of prescription drugs through multiple channels, have contributed to this problem of drug overdoses.
- Changes in pain management clinics have increased the distribution of prescription opioids.
- Diversion, which is the unlawful channeling of regulated pharmaceuticals from medical sources to the illicit marketplace, contributes to this problem.
- Diversion is a very lucrative business. A bottle of 100 Oxycotin 80 mg tablets has a street value of approximately \$7,000.
- The biggest diversion in Ohio is doctor shopping and the pill mills.
- The "Pill Mills" is a term used by investigators to describe a doctor, clinic or pharmacy that is prescribing and dispensing very dangerous drugs inappropriately or for non medical reasons for personal gain.
- In 2008 doctor shopping was most common in ages 25 to 44, especially females.
- In 2008 southern Ohio had a higher rate for doctor shopping.
- The number of treatment admissions for prescription opioids increased more than 300 percent.
- There is an increase in exposure leading to an increase in abuse and misuse, and a lack of treatment that is available.

(The *Alarming Rise in Unintentional Drug Overdose Deaths in Ohio* presentation may be found at [HYPERLINK "http://www.odh.ohio.gov/features/odhfeatures/drugoverdose"] in its entirety).

Discussion followed the presentation

Carter Stewart stated the law enforcement community has seen people go from legal prescriptions to use of illegal drugs. There are people getting hooked on prescription drugs and when those become too expensive, they start using heroin or something that they can get a similar sense or similar feeling.

Dr. Alvin Jackson added that this raises a larger issue of addiction in how we handle that, because if you take one then it may become a substitute for another.

Angela Cornelius Dawson stated that this has been verified by a state entity, a logical outcome work group of the past two years. A trend was beginning to be seen where the increase of prescription drug abuse correlated to an increase in heroin abuse. People do turn to addiction which leads to a larger issue of not being able to access treatments for those individuals.

Ed Hughes asked Christy Beeghly to speak about the data she got for the report in terms of coming from various counties and county coroners. It was his understanding that not all counties are even reporting these deaths necessarily as drug overdose deaths.

Christy Beeghly responded that the coroner fills out a death certificate and determines what caused the death, the manner of death or the intent, whether it's a suicide or unintentional death. This information is received by the

Department of Health. This is the data that is being used to identify these deaths. Some counties, where they are not necessarily reporting the death, may call it something else, not necessarily doing it for the toxicology results. Some county coroners may not have a budget for the increased caseload that they are getting.

Ed Hughes asked if these numbers could actually be higher.

Christy Beeghly responded that these numbers are probably higher, especially in the more rural counties.

David Applegate added that these numbers could all be higher. Some counties are better and their researchers are different. Montgomery County is probably more accurate since they have their own lab to test these things. In some of the smaller counties, money is an issue and time availability. These are some issues that are being addressed and work is being done to try to obtain more accurate data.

Clayton Luckie stated that as of last month 495 individuals were incarcerated for drug related crimes resulting from pill dispensing or selling. Work is needed on how to track individuals in correctional institutions and to get them help while they are in there.

Ed Hughes stated that a common practice is to purchase the first prescription legally with cash or a medical card and then begin diverting after that.

Clayton Luckie added that people will get the first prescription and then copy it and sell half of the first prescription. They take the money they make off of that to buy the second prescription. They keep making copies of those prescriptions and go to different places to fill them.

Christy Beeghly stated that research is showing that many individuals that have been introduced to these substances legitimately through their physicians, while they are very effective, they have a potential for people to become addicted. This is not being managed very well. There is not a lot of help to wean people off of these drugs. This may cause people to switch over to diversion or other activities to maintain their addiction.

Betsy for Steven Dettelbach talked about an indictment that was made against an internet based pharmacy that distributed literally millions of Hydrocodone pills across the country including Ohio. Every single one of those persons had a prescription although it was not a valid prescription. There was a doctor in the DEA registration associated with each one of those numbers. Diversion is not just somebody taking someone else's pills. Diversion is when you have a legitimate need and go to an illegitimate source for illegitimate reasons.

Discussion of the presentation was concluded.

Thomas Hunter presented an overview of the Governor's Executive Order 2010 – 4S which outlines the reason for the creation of the Ohio Prescription Drug Abuse Task Force as well as the priorities and charge of the Task Force. (The OPDATEF Overview of the Executive Order may be found at [\[HYPERLINK "http://www.odh.ohio.gov/features/odhfeatures/drugoverdose"\]](http://www.odh.ohio.gov/features/odhfeatures/drugoverdose) in its entirety).

Chair George Maier stated there is a lot of work that has been going on around the state to address this issue. The Task Force will build on the research that has already been completed and the knowledge and expertise that is available and already out there. The Task Force shall bring this information to the table for discussion and identify those recommendations that can be put into place immediately.

Numerous letters, emails, and phone calls have been received daily since the announcement of the OPDATEF. Many people are very passionate and very interested in being involved in making recommendations for solutions for this multi-jurisdictional problem.

Working groups will be established in the future and will include 1) Public and Consumer Working Group; 2) Provider, Prescriber & Health Care Professionals; 3) Criminal Justice & Law Enforcement; and 4) Policy & Legislative Working Group.

Thomas Hunter stated that within six weeks of issuance of the Executive Order 2010 – 4S and on October 1, 2010, the Chair shall provide a report to the Governor and to the leaders of the General Assembly regarding the work of the Task Force. The first report, due May 17, will include recommendations of which, if any, recommendations should be adopted immediately. Each report shall address the law enforcement, regulatory, public health and treatment recommendations of the Task Force. The Governor has made it very clear that the Task Force should not wait for a scheduled reporting time to work towards the implementation of recommendations developed by the Task Force. The Governor wants to move forward very rapidly and very deliberately in the Task Force's efforts as recommendations are developed, and move forward in adopting those recommendations.

Director Angela Cornelius Dawson stated that clearly this is an epidemic as shown by the 141% percent increase in admissions nationally for prescription drug abuse. 23 million people nationally qualify for a substance dependence disorder. Based on funding at the national and state level the capacity to treat them is about 1 in 10. Judi Moseley will present the recommendations from the Poison Action Group and the New and Emerging Drug Trends Work group. These recommendations are being brought forward so that the Task Force can consider the work they have done.

Judi Moseley presented the Recommendations developed by the Poison Action Group/New and Emerging Drug Trends Work Group. The major areas of recommendations are:

1. Consumer/Public Recommendations (to increase public awareness of the problem)
2. Provider/Prescriber/Health Care Professionals Recommendations (to provide health care professionals with information, training and materials to address the problem within their professions and with patients)
3. Policy and Legislative Recommendations (to implement policy and legislative changes designed to prevent misuse/abuse and unintentional deaths from prescription drugs)
4. Data, Surveillance and Research Recommendations (to increase, improve and coordinate data collection)

(See attached *Recommendations from the Poison Action Group/New and Emerging Drug Trends Work Group in its entirety*).

Closing Remarks

Chair George Maier asked the Task Force members to review the recommendations that were presented and be prepared to discuss them in future meetings.

He also discussed guidelines for public comment. If someone wants to make a public comment, an outline of what they want to speak about must be submitted in advance. There will be a time limit of 10 to 15 minutes so that this will give more people the opportunity to speak.

Clayton Luckie suggested holding regional meetings in the southwest and northwest part of the State that will allow people in these regions, who may not be able to drive to Columbus, a chance to speak. These testimonies can then be brought back to the Task Force.

Thomas Hunter stated that this suggestion may be included in the six week report to the Governor.

A request was made for someone to be on the Task Force from the Department of Insurance. The Department of Insurance has an RFP for a patient information system that will be paid with stimulus money. There needs to

be a way to track patients when they go from point A to point B. It was suggested that patients be assigned a number and entered into the system so that they can be tracked. Permission from the patient would be needed to enter their information into the database due to the privacy act.

Chair George Maier will discuss this request with the Governor's office.

A motion to adjourn the meeting was made.
Motion was seconded.

Meeting adjourned.

Next meeting Date:

Tuesday, April 27, 2010, 2:00 p.m.
Riffe Center
19th Floor, Room 1960
77 South High Street
Columbus, Ohio 43215